

The State of Delaware

Other Benefit Plan Changes for FY21

July 27, 2020

This document was prepared for the State of Delaware's sole and exclusive use and on the basis agreed by the State. It was not prepared for use by any other party and may not address their needs, concerns or objectives. This document should not be disclosed or distributed to any third party other than as agreed by the State of Delaware and Willis Towers Watson in writing. We do not assume any responsibility, or accept any duty of care or liability to any third party who may obtain a copy of this presentation and any reliance placed by such party on it is entirely at their own risk.

Other benefit plan changes for FY21

Recommended for SEBC consideration

- The following programs / changes are recommended for the SEBC's consideration to enhance the medical plans for the FY21 plan year
 - Some of these recommendations align with efforts to support members during the COVID-19 outbreak and recognize the greater need for virtual services in the near future
 - These are not intended to drive savings, but instead enhance member access to covered services

Medical TPA / Plan Options	Program Name & Brief Description	Optional / Legislation	FY21 Cost	Proposed Effective Date
Highmark PPO & First State Basic	Bright Heart Health (via partnership with Highmark) <ul style="list-style-type: none"> ■ Nationally recognized telemedicine service offering virtual comprehensive addiction treatment 24-7-365 	Optional	No additional administrative cost; nominal additional claim cost	9/1/2020
Aetna HMO & CDH Gold	Tele-Behavioral Health through Teladoc <ul style="list-style-type: none"> ■ Expanded access to behavioral health treatment through Teladoc (similar telehealth capability already in place for Highmark members with Amwell) 	Optional	\$100,000 - \$140,000 (estimated) ¹	9/1/2020
Aetna HMO & CDH Gold	Retrofit (via partnership with Aetna) <ul style="list-style-type: none"> ■ This program is no longer available. Aetna is currently exploring other options for the Committee's consideration. 		N/A	N/A
Total cost for FY21 – other medical plan changes			\$100,000 - \$140,000 (estimated)	

¹ Includes \$24,000 in administrative fees and estimated claim costs ranging from \$72,000 - \$113,000 (estimate provided by Aetna), rounded to nearest \$10,000.

Next steps

- SEBC to vote on optional programs for FY21 to be implemented effective September 1st or earlier if website updates, communications, etc. can be completed:
 - Highmark Bright Heart Health solution
 - Aetna Tele-behavioral health expanded access through Teladoc